## CITY OF ST. CHARLES, MISSOURI DEPARTMENT OF PUBLIC WORKS STORM SEWER PERMIT

| Name and Address of Owner, Developer or Agent:   | Name and Address of Party doing Work:   |
|--|---|
| Phone #: Email:  EMERGENCY CONTACT INFORMATIO  | Phone #: Email:   |
| Contact #1  Name:  | Name: Phone: After Hours Phone:   |
|  | NIN7  |
| Length of Storm Sewer to be installed =  | feet  |
| information is correct and accurate. Permite Charles from any loss, damage, liability, and to property directly or indirectly arising or given Permitee shall hold the City of St. Charles has against the City of St. Charles for any loss, of the work described above. The Permitee City employees. | per, Contractor or Agent) does hereby certify that the above see shall protect, indemnify, and hold harmless the City of St. I expense for all injuries, including death to persons or damage rowing out of the performance of the work described above. armless from and shall answer and defend any action instituted damage, or injury sustained by any person from the performance also consents to allowing access and inspection of the work by |
| Signature of Authorized Agent:   | Date:   |
| Title:   | EST 1809  |
| City Code Sections §510.220-510.260 cover  |   |
| work. Any offsite work in easement or right<br>Department and notification of the adjacent<br>work commencing. Failure to notify the City  | orks Dept. at (636) 949-3237 twenty four (24) hours prior to any t-of-way must be coordinated through the Public Works property owners must be made at least 48 hours prior to any y may result in rejection of the work and non-acceptance of the e City's Construction Specifications (MSD Standard   |
| This permit must be on the job site at all time  | es and will expire in <u>60 days</u> unless noted otherwise.  |
| Section Below is for City Use Only:  | 1   |
| Permit Fee: \$ Security/Escrow Amount: \$  | Date Paid:<br>Date:   |
|  |   |
| Permit Expires:  | Public Works Department  Date:  |
| -  |   |
| Special Conditions:  |   |